

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			03/30/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FR	1018	5/10/01
RESPONSE FORMALITY REVIEW	SCB	1091	7-21-01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

APPLICANT  
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TITLE APPLICANTS

CLASS

INTERNAL

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☐ The term of the patent subsequent to the date of the issue of the patent has been extended

☐ The term of the patent has not been extended

☐ The term of the patent has been extended

**WARNING**  
The information on this form is for informational purposes only and does not constitute an offer of insurance or any other financial product.

Form PTO-435 (Rev. 6/99)

Claim	Final	Original	Date
1	✓	✓	4-12-01
2	✓	✓	4-12-01
3	✓	✓	4-12-01
4	✓	✓	4-12-01
5	✓	✓	4-12-01
6	✓	✓	4-12-01
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8	✓	✓	4-12-01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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